IMAC IT Subcommittee Meeting Minutes Meeting held August 8, 2002 9:00am-12:00pm

Present: Debbie Bigler (Milwaukee Co.), Bill Blank (Juneau Co.), Jeanne Brandl (Marathon Co.), Theresa Fosbinder (Deloitte Consulting), Jim Jones (BHCE), Kathy Luedtke (DHFS), Bob Martin, Mike McKenzie (ONSPI), LuAnn Page (Waukesha Co.), Tony Sis (Dane Co.), Laurie Teubert (Call Center), Pam Waffle (Columbia Co)

- The CARES Management Structure was discussed and a handout provided. On this
 handout is a flow chart, at the top is a yellow box. In that box, it should have the detailed
 information of the Executive Committee which is made up of Secretaries from DEG
 (Department of Electronic Government), DHFS (Department of Health and Family Services)
 and DWD (Department of Workforce Development).
- The CARES management team is then listed under the Executive Committee, which is comprised of Bureau Directors. Under that is the CARES Executive Manager (Bob Martin).
- Much of the meeting was spent defining the charter and scope of this group.
- One of the issues discussed is that there will need to be minutes and other information out on the Web communicating the activities, etc. of this group. There is currently an IMAC website, but hasn't been updated since 5/02. Bob will look into the possibility of moving this site to DHFS and having it accessible on the Internet as it is now on the DWD extranet. Since this is public information, it should be on the Internet. There was also discussion on possibly having a newsletter.
- One of the goals of this group is to communicate to agencies information on CARES/other IT changes from the State, as well as solicit local agency input on upcoming changes.

 Business areas (i.e.: FS, MA, etc) can also bring issues to this group to use as a sounding board or just for information sharing. Also, if things cannot be accomplished as per agency feedback/request, this group can help communicate why/why not something can/cannot be done.
- Jim Jones gave a brief overview of Senior Care.
 - 1. As of 8/6/02 28,000 applications had been submitted, about 10% were returned for signature in the appropriate place.
 - 2. 21,400 of these had been returned from the scanner (applications are being sent to DOA for scanning into the CARES system, after they are scanned in, the CAPO processes for eligibility).
 - 3. 359 had been confirmed eligible.
 - 4. About 19,000 applications were going to be processed as of this date.
 - 5. 8/24/02 will be the date that the SC cards are printed, sent out on 8/27. This card will be a separate white card that indicates Senior Care. It is different than the Forward card.
 - 6. By 9/1/02, approximately 46,000 recipients will have their cards, and another 46,000 by the end of September. The estimate of potential SC eligible recipients is 177,000.
- The group reviewed a matrix provided by Bob regarding CARES Cost Allocated Projects.
 Jim Jones asked that this list be prioritized by the group. Below is the list as prioritized by the group (see the list for further description of the project). There was one project inadvertently left off the matrix AE Find Function. New, updated matrix will be distributed.

<u>Project</u>	Rank (group)	Rank (BAM/CMT Team)
Data Exchange Re-engineering	1	7
Alerts	1	9
Notice Re-Design	1	1
Clearance Process Enhancement	4	6
Employment Reporting and Earnings	5	15
Modify/Enhance Query Driver	5	12
Case Transfer Simplification	7	5
SMUM Security Maintenance Change	8	13
Race/Ethnicity Code	9	1

- One of the issues raised by the group is if the agencies have feedback or input into CARES changes, etc. will that feedback be considered? Some mentioned in the past they have given a lot of feedback that never seemed to happen (with regard to changes/fixes in CARES, etc). There was discussion that this will be considered, but sometimes other priorities/legislative mandates take precedence over other CARES fixes/maintenance. When considering what types of changes can/should be made in CARES, or to assist in having the priority of something changed, the cost effectiveness must also be weighed-the cost of the fix must be justified.
- Part of the problem when implementing big changes in CARES (i.e.: client notice re-design, Family Care, etc) is the issue of contention. This is when one program is so big, there is a "freeze" put on CARES for any fixes or enhancements, so other programs are "locked out." The Village Project may reduce some of this in the future.
- CARES has an annual budget of \$38.6 million. Of this:
 - 1. \$14 million is spent just to run the system.
 - 2. \$8-10 million is for programs to use for discretionary costs.
 - 3. Several million is spent on database administration.

Bob will try to bring this budget to the next meeting for review.

Next steps:

- 1. Theresa will comprise a list of ways the State communicates to agencies (i.e.: Operations Memos, etc).
- 2. Try to get some idea of the information that people/agencies want to see. What types of communication work best, least? How do people want information disseminated?
- 3. Bob will tweak the project list and charter for this group to further define what our assignments and the scope are.

Next meeting:

- 1. The group will review the list of priorities for the MA and FS areas.
- 2. The group will receive an update on the Village project.
- 3. The group will review the CARES budget.
- 4. Bob will bring statistics on CARES "up time" and transaction numbers.
- 5. The group will make its own list of priorities.
- 6. Members will bring their own list of priorities to see if they can be incorporated into existing future fixes (if the State has not already identified these "futures".
- 7. We will meet monthly, the 2nd Thursday of the month at 9:30 Am.. Location TBD